

professionally successful, now, in two dramatically different professions.

We speak often of the role model nature of professional athletes. In STEVE LARGENT, we have an athlete who is truly a role model for our society; an individual who has shown that fame and high income is not inconsistent with the finest possible family and citizen leadership that it is possible for us to imagine. Last week, Congressman LARGENT was a part of the debate in the House of Representatives over a balanced budget amendment on which debate will begin in this body in less than an hour. So he is now serving in as distinguished a fashion as a Member of this Congress as he did as a member of the Seattle Seahawks and the National Football League. But most of all, our friend and exemplar, STEVE LARGENT, is a person who shows what citizenship and membership in a family ought to be in the United States of America.

So it is that we, from the State of Washington, are grateful for his long association with us. We wish, along with the people of Oklahoma, and especially of his First Congressional District, to congratulate him on an honor well earned and to wish him long years of success in his new career and a lifetime of success as a leader of the people he represents.

The PRESIDING OFFICER. The Senator from North Dakota is recognized. I might suggest the Senator from North Dakota is recognized for 15 minutes.

Mr. CONRAD. I thank the Chair.

(The remarks of Mr. CONRAD pertaining to the introduction of S. 293 are located in today's RECORD under "Statements on Introduced Bills and Joint Resolutions.")

Mr. SIMON addressed the Chair.

The PRESIDING OFFICER. The Senator from Illinois.

MONTHLY REPORT TO THE SENATE

Mr. SIMON. Mr. President, and my colleagues in the Senate. On November 14, I announced that I will not be a candidate for reelection to the Senate nor for any other office. I will be leaving with great respect for this body and with great appreciation to the people of Illinois who made it possible for me to serve here.

The evening of my announcement, President Clinton called me from Djakarta, Indonesia, to wish me the best. He made a suggestion: Once a month I should report to the public on what is happening and what should happen in Congress. He indicated that since I will not be a candidate for reelection, my words might take on added significance and not be viewed as another partisan speech.

I am making the first of my monthly comments today, the 113th anniversary of the birth of Franklin D. Roosevelt, a President who has been praised recently by both President Clinton and

Speaker NEWT GINGRICH. FDR and Congress worked together on the huge problems the Nation then faced.

A glance at the policy landscape provides these recent positive developments, from my perspective:

First, a peaceful change in the majority party in both Houses of Congress. While I personally would have preferred retaining Democratic majorities in the House and Senate, I also recognize that for a free system to thrive, peaceful change must occur from time to time.

Second, Congress has voted to place the laws and regulations that govern our private sector counterparts on itself, and the President has signed that measure. That will protect our employees better and make us more sensitive to the difficulties others face.

Third, the Senate Judiciary Committee—and now the full House of Representatives—have approved a balanced budget amendment to the Constitution. The passage of the amendment first urged by Thomas Jefferson come none too soon as we careen down the fiscal hill toward the fate of far too many nations: monetizing the debt, meeting our obligations by printing more and more money that is worth less and less.

There are negative developments also. I would include:

First, excessive partisanship in Congress by both political parties as we adjust to the new status each has. That we will differ on issues is both natural and healthy; that we are sometime petty in our differences may be natural for all of us who have above-average egos, but it is not healthy.

Second, a mean-spiritedness toward the poor surfaces in too much discussion of welfare reform, sometimes bordering on racism. We need genuine welfare reform. The danger is that we will move organizational boxes around on a chart and try to convince the public and ourselves that we have done something constructive. Even worse, there is talk of taking punitive action against poor people.

Third, the two parties have entered into a bidding war on tax cuts. Many of the Republicans promised one in their Contract With America, and President Clinton pledged the same in altered form. Both sides are wrong. If I may personalize this, I face a choice of giving myself a small tax cut and imposing a further burden on my three grandchildren, or sacrificing a little and providing a better future for my grandchildren. I do not have a difficult time making that choice, and I do not believe most Americans do. We should pledge a reduction in the deficit instead of a tax cut.

Others can provide additional pluses and minuses.

But one issue that dominated the political landscape only a few months ago is almost absent: health care. Yes, the President—to his credit—mentioned it in his State of the Union Message, but little is said on the floors of the House

and Senate about this massive problem. Television and radio news programs rarely mention it. What once was a dominant issue at town meetings in my State has almost staged a disappearing act.

But it will not disappear, not as long as almost 40 million Americans remain unprotected, the only citizens of any modern industrial nation with that status. It will not disappear as long as Americans are added to the lists of uninsured at the rate of more than 91,000 every month, 3,055 every day.

Since the day President Clinton waved his pen at us in a joint session of Congress on January 25, 1994, 1.1 million more Americans have lost their health insurance coverage, bringing the total to 39.7 million. And costs continue to escalate. Medicare spending, for example, will double in the next 7 years and will then consume 16 percent of our total Federal spending. But we cannot tackle Medicare costs without tackling the health care costs in the rest of our economy. As we cut from Medicare, we shift the burden to the private sector—and every private-paying patient makes up the difference when Medicare underpays hospitals by about \$13 billion every year, as it does now.

Seven days ago marked 56 years since Franklin Roosevelt sent a message to Congress for a national health program. But early in 1931, as Governor of New York, he reported to the legislature of that State: "The success or failure of any government in the final analysis must be measured by the well-being of its citizens. Nothing can be more important [than] * * * the health of its people." Since then, Harry Truman and Richard Nixon and Bill Clinton have called upon us to protect our citizens better, and Congress has failed to respond.

This issue will not go away. It is more than grim statistics. It is my former staff member, now a consultant with the Federal Government but without health insurance coverage because she is technically not an employee. At a dinner with two friends, she suddenly experienced chest pains, paleness, perspiration, and nausea—often symptoms of a heart attack. She refused to go to a hospital for fear of the cost. It turned out she has a problem with food poisoning that was not serious. But how many people have died who actually have had heart attacks in that situation? A woman in McHenry, IL, wrote to me about the health coverage horrors her daughter and son-in-law have gone through, facing the loss of their home and car. And then this woman who wrote to me added:

I have had cancer, so I can never quit my job as no one else will give me insurance. My husband has had ileitis and two types of diabetes so no one will give him insurance. We are trapped in our jobs and could not afford to pay for our own insurance if we ever got permanently laid off or had to switch jobs. We are 48 and 53 years old and this is a scary thought.

Or listen to this man from Oak Lawn, IL:

I am a Republican and will continue to vote Republican. However * * * during some lean times I had to let my health insurance lapse. It was not, as some politicians and demagogos so smugly suggest, because I spent the money on recreation. I spent the money on food, rent, and bills. But I was forced to stay in the hospital a while. Now I am completely financially ruined. I'm 41 years old and I'm ruined.

Or the mother in Ottawa, IL, injured in an automobile accident, whose husband suffered injury in a work-related accident and must find different work. She writes

My husband and I and three children ages 18, 12, and 10 are now without health benefits. Due to our disabilities and unfair treatment by insurance companies our financial situation is dire.

The stories go on and on.

Those stories will multiply if we do not act. And other changes in health care delivery are emerging. Each week fewer and fewer Americans have an independent choice of physician. Each week, for-profit corporations are taking over not-for-profit hospitals, reducing the number of nurses on duty and requiring resident physicians to see more patients in less time, diminishing the quality of health delivery. At least one physician in Illinois has decided to give up the practice rather than provide care that uses mass production techniques.

And Medicaid patients—poor people—routinely are given the cold shoulder for nonemergency care by many hospitals who prefer patients with insurance coverage.

The United States is the wealthiest nation but not the healthiest nation. Twenty-one nations have lower infant mortality rates than we do, and 23 industrialized nations have fewer low-birthweights babies. Yet these countries spend far less on health care than we do, and many have a longer average lifespan. That is not because of an act of God but because of flawed policy. Our poor health record did not come as some divine edict from above but emerged from the indifference of men and women in this very room.

Why? Part of the reason was complexity and delay on the part of those of us who supported a health coverage program. But that is only a part of the picture. What primarily caused the confusion and opposition was the greed on the part of those who profit from their cut in this trillion-dollar business. Newsweek reported that opponents spend \$400 million, more than twice what the two major Presidential candidates spend in the last two elections combined. When CEO's who are engaged in the present system pocket as much as \$10 million in 1 year, do you think they will be anxious to alter the present procedures which help them and hurt millions of Americans? The Wall Street Journal recently stated that Health Systems International of Colorado has \$475 million in cash, and the amount is growing by \$500,000 a

day, and the Journal reports they are "hunting for new ways to park the money." Do they want to change the system? The same article quotes Margo Vignola of Salomon Brothers saying that the top nine HMO's have \$9.5 billion in cash, "way beyond what HMO's need." Do they want to change the system? Pfizer, the pharmaceutical company, gave \$221,235 to the Republican national committees in soft money before the election. Did they do that because they want to change the system?

The common assumption is that with a Democratic President and a Republican Congress, no significant progress in health care can be made. I challenge that assumption.

The greatest contribution of Harry Truman's Presidency—one of many significant contributions he made—was the creation of the Marshall plan. To many it seemed doomed when offered. The first Gallup Poll after its proposal showed only 14 percent of the American people supported it. On top of that, after the 1946 election, President Truman had to work with a Republican Congress. But one man, Senator Arthur Vandenberg of Michigan, a key Republican, stood up strongly and supported the Marshall plan and helped to save Western Europe. The Republicans in the Senate have designated as their new leader on health care Senator ROBERT BENNETT of Utah, one of the more thoughtful Members of this body. Is it possible that he, together with the new chair of the Finance Committee, BOB PACKWOOD, can be the Arthur Vandenberg of our generation?

It is politically understandable that Republican Senators might have been reluctant to work with Democrats on health care reform in the 103d Congress, for fear that they would hand Democrats a legislative victory. But now, that is behind us. With Republicans in control of both Chambers of Congress, there is no question that bipartisan agreement on health care will be of benefit to the broad public and not simply a political victory for one party at the expense of the other.

Could we, for example, at least provide coverage for all pregnant women and children age 6 and under? Do we have the courage to stand up to the profiteers to at least do that?

Let me add that it is not enough for Senators to stand up. They are not likely to do it in splendid isolation. Business and labor leaders, professional people and those who have been abused by this system must join in a chorus for action. Their voices will not be as strong as the decibel level of those who speak from greed, but Senators and House Members should know that there are at least some Americans who know and understand the dimensions and the importance of the issue.

There are occasions when we, in the Senate, must ask ourselves: Why are we here? Let us look in the faces of 39 million Americans without health care coverage and ask ourselves that question. Let us look at the millions more who will lose their coverage if they

lose their jobs or change jobs. Let us not be silent and unresponsive to their pleas for help. Let us not be so eager to hold public office that we violate the public trust, not by disobeying the law, but by following the shifting winds of public opinion and the pressures of big campaign donors.

There are no Americans who today look to their forebears and say with pride, "He or she voted against creating Social Security." There are no Americans who look to their grandparents or great-grandparents and say with pride, "He or she voted against Medicare."

We are not here in the Senate simply to assume an exalted title and let the media message our egos. We are here to create a better future for our people and for generations to come. In the last session, the Senate did not even vote on health care. That will not happen again. But we should do more than give ourselves an opportunity to vote. We should, in a fiscally prudent, pay-as-you-go way, give all Americans what we as legislators and Federal employees have: health care protection. We should give future generations the ability to look back upon us with pride and say, "They were the first political leaders to guarantee health care coverage for all our citizens."

Mr. THOMAS addressed the Chair.

The PRESIDING OFFICER. The Senator from Wyoming is recognized.

THE PASSING OF LORNA KOOI SIMPSON

Mr. THOMAS. Mr. President, I rise today for a short tribute to a lady from Wyoming who passed away last week, a lady who certainly was a rare and wonderful gem, not only for Wyoming but for this country as well. She was someone that I had the great privilege of knowing and admiring, Lorna Kooi Simpson.

My friend AL SIMPSON and the entire Simpson family lost a wonderful mother and caregiver last week. We all have lost one of the greatest ladies of Wyoming and the dearest of souls. Her devotion to her family, community, State and Nation are a legacy. Indeed she is part of the very fabric of Wyoming.

Lorna Simpson began her long distinguished life on August 19, 1900—the daughter of a Dutch immigrant. With her family Lorna Simpson moved West. In 1929 Lorna married an exceptional young man, a lawyer, from Cody, WY—Milward Simpson. He was a State legislator for Wyoming and a man destined to lead his State. Together they had two sons, Peter and ALAN. In Lorna, Milward found an equally dedicated soul and a partner to do the work few of us have the means to accomplish.

Lorna, like the rest of her family, went on to do great things. She was a stalwart of her community and State; active in community service, business, the war effort and of course politics.